

DOCKET FILE COPY ORIGINAL

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JUN 18 2001

**Intelenet Commission**  
101 West Ohio Street, Suite 800  
Indianapolis, IN 46204

**FCC MAIL ROOM**

June 13, 2001

Federal Communications Commission  
Office of the Secretary  
445 - 12th Street, S.W.  
Room TW-A325  
Washington, DC 20554

Re: In the matter of: Request for Review by the Intelenet Commission of  
Decision on Appeal of Universal Service Administrator  
FCC Docket Nos. 96-45 and 97-21

Billed Entity Number: 151654  
471 Application Number: 201666  
Funding Request Number(s): none assigned

Contact Name: Bob G. Carnal  
Contact Telephone: 317-972-8832  
Contact FAX: 317-972-9064  
Contact email: [bcarnal@admtec.com](mailto:bcarnal@admtec.com)

On behalf of the Intelenet Commission, we hereby request a review of the Administrator's Decision on Appeal – Funding Year 2000-2001, dated June 4, 2001 (copy attached), as allowed by §54.719.

We appealed the omission of Clark County Special Education Cooperative and Porter County Education Interlocal (copies attached) from the Funding Commitment Decision Letter, asking the SLD to fund our request as originally submitted. The appeal denial stated as a reason for the rejection that this entity was not included in the original Form 471 submission. To the contrary, these entities, Clark County Special Education Cooperative, Entity #130543, and Porter County Education Interlocal, Entity #130332, were on the original Form 471 Application #201666, as verified by the attached pages from said application, i.e., Worksheet A-5 (page 1 of 2 and page 2 of 2), and Block 5, page 5 of 19-Amended 4/00 (which includes corrections made as requested by the SLD in April of 2000); and Worksheet A-14, pages 1 through 6 of 6), and Block 5, page 14 of 19. Many times during data entry at the SLD, we would receive calls questioning our applications, requesting changes be made, as was the case for Clark County Special Education Cooperative. The rejection letter further stated that we did not respond to the Receipt Acknowledgment Letter of its omission. We will admit that we did not respond to the Acknowledgment Letter, as was our responsibility, but the mass volume of

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correspondence we were receiving on a daily basis from the SLD masked the steps to be taken. We also feel that the SLD should take responsibility for their errors and omissions on the original application and add/include these two entities in their funding decision.

We feel it is not reasonable to penalize these two special education cooperatives, and the school districts that they serve, by denying them funding when the error/omission originated with the SLD. **We respectfully request that the FCC order and direct the SLD to grant a funding request for Clark County Special Education Cooperative and Porter County Education Interlocal, which we have shown to have been included on the original Form 471 application request.**

Sincerely,

A handwritten signature in black ink, appearing to read "Bob G. Carnal", with a long horizontal line extending from the end of the signature.

Bob G. Carnal, Ed.D.  
Contact

cc: Administrator, Universal Service Administrative Company

Enclosures



**Universal Service Administrative Company**  
Schools & Libraries Division

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**Administrator's Decision on Appeal - Funding Year 2000-2001**

June 4, 2001

Bob G. Carnal  
Intelenet Commission  
101 West Ohio Street, Suite 800  
Indianapolis, IN 46204



Re: Billed Entity Number: 151654  
471 Application Number: 201666  
Funding Request Number(s): 2 FRN #'s not assigned.  
Your Correspondence Dated: October 25, 2000

After thorough review and investigation of all relevant facts, the Schools and Libraries Division ("SLD") of the Universal Service Administrative Company ("USAC") has made its decision in regard to your appeal of SLD's Year Three Funding Commitment Decision for the Application Number indicated above. This letter explains the basis of SLD's decision. The date of this letter begins the 30-day time period for appealing this decision to the Federal Communications Commission ("FCC"). If your letter of appeal included more than one Application Number, please note that for each application for which an appeal is submitted, a separate letter is sent.

Funding Request Number: 2 FRN #'s not assigned  
Decision on Appeal: **Denied in full**  
Explanation:

- You stated that SLD omitted two funding requests from your application. You are requesting that these FRNs be added on appeal.
- The original documentation submitted in support of your application does not include the two FRNs you are requesting to be added. There is also no indication that this correction was requested during the RAL period..
- Your appeal requests additional funds that were not included in the Form 471 in regard to which you are appealing SLD's funding decision. FCC rules require that funding requests be made on Forms 471. See 47 C.F.R. § 54.504. Funding requests may not be made on appeals of SLD funding commitment decisions. Whether your request can be considered for funding will depend on the date your Form 471 is received and, if it is received after the close of the

filing window, whether funds are available. *See* 47 C.F.R. § 54.507(g). Consequently, SLD denies your appeal insofar as it requests funding not requested in the Form 471 which forms the basis of this appeal.

If you believe there is a basis for further examination of your application, you may file an appeal with the Federal Communications Commission, Office of the Secretary, 445 12<sup>th</sup> Street, SW, Room TW-A325, Washington, DC 20554. Please reference CC Docket Nos. 96-45 and 97-21 on the first page of your appeal. Before preparing and submitting your appeal, please be sure to review the FCC rules concerning the filing of an appeal of an Administrator's Decision, which are posted on the website at <[www.universalservice.org](http://www.universalservice.org)>. **You must file your appeal with the FCC no later than 30 days from the date on this letter for your appeal to be filed in a timely fashion.**

We thank you for your continued support, patience, and cooperation during the appeal process.

Schools and Libraries Division  
Universal Service Administrative Company

**Intelenet Commission**  
101 W. Ohio Street, Suite 800  
Indianapolis, Indiana 46204

copy

October 25, 2000

Letter of Appeal  
Schools and Libraries Corporation  
Box 125-Correspondence Unit  
80 South Jefferson Road  
Whippany, NJ 07981

This letter is an appeal of the Funding Commitment Decision Letter with the following identifying information:

Contact Name: Bob G. Carnal  
Contact Telephone: 317-972-8832  
Contact FAX: 317-972-9064  
Contact email: [bcarnal@admtec.com](mailto:bcarnal@admtec.com)

Form 471 Application Number: 201666  
Entity: Intelenet Commission  
101 W Ohio Street, Suite 800  
Indianapolis, IN 46204  
Entity Number: 151654

FRN's subject of appeal: none assigned 130543 Clark County Special  
Education Cooperative  
none assigned 130332 Porter County  
Education Interlocal

The two entities above (Clark County Special Education Cooperative and Porter County Education Interlocal) were omitted from our Funding Commitment Decision Letter. Both entities, however, were filed on our form 471. I have enclosed a copy of our Block 4, Worksheet #A and Block 5 of our application 2000-112-471-6. Our request for Porter County Education Interlocal was for \$18,800.00 in total program year pre-discount amount with a 43% discount rate yielding a Funding Commitment Request of \$8,084.00. Our request for Clark County special education Cooperative was also for \$18,800.00 in pre-discount amount at 52% for \$9,776.00 in Funding Commitment Request.

Thank you for your consideration of this appeal.

Sincerely,

A handwritten signature in black ink, appearing to read "Bob G. Carnal". The signature is fluid and cursive, with the first name "Bob" and last name "Carnal" clearly distinguishable.

Bob G. Carnal,  
Contact

Entity Number <u>151654</u>	Applicant's Form Identifier <u>2000-112-471-6</u>	
Contact Person <u>Bob Carnal</u>	Phone Number <u>317-972-8832</u>	

## Block 4: Discount Calculation Worksheet A for Individual Schools/School Districts

**Worksheet #A-5**

**Page 1**

**of 2**

Amended 4-7-00

**Instructions:** Individual Schools/School Districts use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

**10a Check only one:**

- ☐ Applying **ONLY** for an individual school, or **ONLY** site-specific services: Complete columns 1-7 only for each school. Add and number pages as needed. Then use each school's Entity Number and its discount from Column 7 to complete Block 5 site-specific service to that school.
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**10b List entities and calculate discount(s).**

1 Name of School	2 Entity Number	3 Urban or Rural U or R	4 Total # of Students	5 # of Students Eligible for NSLP	6 % Students Eligible for NSLP (Col. 5 ÷ Col. 4)	7 Discount % from Discount Matrix	8 Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)
Clark Co Special Ed Coop	130543	U					
w e wilson elementary ✓	52924	U	415	123	29.6%	50%	207.5
thomas jefferson elementary school ✓	52922	U	372	94	25.3%	50%	186.0
northaven elementary school ✓	52921	U	436	172	39.4%	60%	261.6
utica elementary school ✓	52925	U	157	54	34.4%	50%	78.5
new washington elem schools ✓	52961	U	332	114	34.3%	50%	166.0
new washington high school ✓	52960	U	439	104	23.7%	50%	219.5
charlestown senior high school ✓	52882	U	596	153	25.7%	50%	298.0
jonathan jennings elem school	52886	U	489	198	40.5%	60%	293.4
			3236				1710.5
→							

Entity Number <b>151654</b>	Applicant's Identifier <b>2000-112-471-6</b>	
Contact Person <b>Bob Carnal</b>	Phone Number <b>317-972-8832</b>	

## Block 4: Discount Calculation Worksheet A for Individual Schools/School Districts

**Worksheet #A-5**

**Page 2**

**of 2**

Amended 4-7-00

**Instructions:** Individual Schools/School Districts use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

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1 Name of School	2 Entity Number	3 Urban or Rural U or R	4 Total # of Students	5 # of Students Eligible for NSLP	6 % Students Eligible for NSLP (Col. 5 ÷ Col. 4)	7 Discount % from Discount Matrix	8 Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)
Clark Co Special Ed Coop	130543	U	3236				1710.5
clarksville senior high school ✓	52908	U	401	93	23.19%	50%	200.5
george rogers clark elem school ✓	52910	U	245	124	50.61%	80%	196
greenacres elementary school ✓	52909	U	422	147	34.83%	60%	253.2
clarksville middle school ✓	52907	U	353	122	34.56%	60%	211.8
Henryville Jr/Sr High School ✓	52903	U	352	58	16.48%	40%	140.8
Henryville Elementary School ✓	52904	U	481	124	25.78%	50%	240.5
Silver Creek High School ✓	52986	U	612	86	14.05%	40%	244.8
Silver Creek Jr High School ✓	52985	U	290	54	18.62%	40%	116
Sellersburg Elementary School ✓	52987	U	226	88	38.94%	60%	135.6
			6618				3449.7
→							52%



Entity Number	151654	Applicant's Form Identifier	2000-112-471-6
Contact Person	Bob Carnal	Phone Number	317-972-8832

## Block 5: Discount Funding Request(s)

Block 5, page 5 of 19 Amended 4-7-00

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.  
 Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly.

FRN # (to be assigned by administrator)

<b>11 Category of Service</b> (only ONE category should be checked) <input type="radio"/> Telecommunications Service <input checked="" type="radio"/> Internet Access <input type="radio"/> Internal Connections		<b>15 Contract Number</b> (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions)	01-99
		<b>16 Billing Account Number</b> (e.g., billed telephone number)	1A1SB
<b>12 Form 470 Application Number</b> (15 digits)	363240000174049	<b>17 Allowable Contract Date</b> (mm/dd/yyyy, based on Form 470 filing)	3/2/99
<b>13 SPIN - Service Provider Identification Number</b> (9 digits)		<b>18 Contract Award Date</b> (mm/dd/yyyy)	04/18/99
		<b>19 Service Start Date</b> (mm/dd/yyyy)	07/01/00
<b>14 Service Provider Name</b> AT&T		<b>20 Contract Expiration Date</b> (mm/dd/yyyy)	04/18/04
<b>21 Description of This Service:</b>		You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # 2000-112-471-6	
<b>22 Entity/Entities Receiving This Service:</b>		a. If the service is site-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service : b. If the service is shared by all entities on a Block 4 worksheet, list the worksheet number (e.g., A-1): A-5	

Recurring Charges					One-Time Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (D x C)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (J x I)
\$1,375.00	\$0.00	\$1,375.00	12	\$16,500.00	\$2,300.00	\$0.00	\$2,300.00	\$18,800.00	52%	\$9,776.00

Entity Number	151654	Applicant's Form Identifier	2000-112-471-6
Contact Person	Bob Carnal	Phone Number	317-972-8832

## Block 4: Discount Calculation Worksheet A for Individual Schools/School Districts

Worksheet #A-14

Page 1  
of 6

**Instructions:** Individual Schools/School Districts use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

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**10b List entities and calculate discount(s).**

1 Name of School	2 Entity Number	3 Urban or Rural U or R	4 Total # of Students	5 # of Students Eligible for NSLP	6 % Students Eligible for NSLP (Col. 5 + Col. 4)	7 Discount % from Discount Matrix	8 Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)
	130332						
Porter County Education Interlocal	130332	U					
hebron jr-sr high school ✓	51821	U	550	43	7.82%	40%	220
hebron elementary school ✓	51820	U	620	48	7.74%	40%	248
jackson elementary school ✓	51959	U	454	26	5.73%	40%	181.6
brummitt elementary school ✓	51718	U	458	49	10.70%	40%	183.2
liberty middle school ✓	51723	U	532	67	12.59%	40%	212.8
liberty elementary school ✓	51722	U	501	90	17.96%	40%	200.4
chesterton senior high school ✓	51717	U	1877	125	6.66%	40%	750.8
westchester middle school ✓	51720	U	713	80	11.22%	40%	285.2
			5705				2282

Entity Number 151654 Applicant's Form Identifier 2000-112-471-6  
 Contact Person Bob Carnal Phone Number 317-972-8832

## Block 4: Discount Calculation Worksheet A for Individual Schools/School Districts

Worksheet #A-14

Page 2  
of 6

**Instructions:** Individual Schools/School Districts use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

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Porter County Education Interlocal	1303332	U	5705				2282
bailly elementary school ✓	51719	U	501	55	10.98%	40%	200.4
newton yost elementary school ✓	51716	U	455	87	19.12%	40%	182
morgan township school (h) ✓	51957	U	281	14	4.98%	40%	112.4
morgan township school (e) ✓	51956	U	274	15	5.47%	40%	109.6
kouts middle/high school ✓	51842	U	415	38	9.16%	40%	166
kouts elementary school ✓	51841	U	290	34	11.72%	40%	116
washington township mid/high sch ✓	51974	U	351	32	9.12%	40%	140.4
washington township school (e) ✓	51958	U	295	28	9.49%	40%	118
Amended 4-7-00			8567				3426.8

Entity Number	151654	Applicant's Form Identifier	2000-112-471-6
Contact Person	Bob Carnal	Phone Number	317-972-8832

## Block 4: Discount Calculation Worksheet A for Individual Schools/School Districts

Worksheet #A-14

Page 3  
of 6

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1	2	3	4	5	6	7	8
Name of School	Entity Number	Urban or Rural U or R	Total # of Students	# of Students Eligible for NSLP	% Students Eligible for NSLP (Col. 5 ÷ Col. 4)	Discount % from Discount Matrix	Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)
Porter County Education Interlocal	1303332	U	8567				3426.8
Boone Grove Elementary School ✓	51706	U	287	38	13.24%	40%	114.8
* Boone Grove High School	210847	U	523	29	5.54%	40%	209.2
Boone Grove Middle School ✓	51707	U	398	36	9.05%	40%	159.2
Porter Lake Elementary School ✓	51822	U	394	31	7.87%	40%	157.6
wheeler high school ✓	51973	U	480	32	6.7%	40%	192
union township middle school ✓	51972	U	325	17	5.2%	40%	130
union center elementary school ✓	51971	U	366	15	4.1%	40%	146.4
john simatovich elementary school ✓	51970	U	269	48	17.8%	40%	107.6
Amended 4-7-00			11609				4643.6

Entity Number <b>151654</b>	Applicant's Form Identifier <b>2000-112-471-6</b>	
Contact Person <b>Bob Carnal</b>	Phone Number <b>317-972-8832</b>	

## Block 4: Discount Calculation Worksheet A for Individual Schools/School Districts

**Worksheet #A-14**

Page **4**  
of **6**

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Porter County Education Interlocal	1303332	U	11609				4643.6
portage high school ✓	51912	U	2598	348	13.39%	40%	1039.2
wallace aylesworth elem school ✓	51903	U	525	173	32.95%	50%	262.5
william fegely middle school ✓	51910	U	661	178	26.93%	50%	330.5
crisman elementary school ✓	51899	U	450	143	31.78%	50%	225
central elementary school ✓	51905	U	552	195	35.33%	60%	331.2
ethel r jones elementary school ✓	51900	U	477	88	18.45%	40%	190.8
willowcreek middle school ✓	51904	U	1150	236	20.52%	50%	575
rowena kyle elementary school ✓	51908	U	406	61	15.02%	40%	162.4
<b>Amended 4-7-00</b>			<b>18428</b>				<b>7760.2</b>



Entity Number <b>151654</b>	Applicant's Form Identifier <b>2000-112-471-6</b>	
Contact Person <b>Bob Carnal</b>	Phone Number <b>317-972-8832</b>	

## Block 4: Discount Calculation Worksheet A for Individual Schools/School Districts

**Worksheet #A-14**  
**Page 5**  
**of 6**

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Porter County Education Interlocal	1303332	U	18428				7760.2
paul saylor elementary school ✓	51969	U	368	137	37.23%	60%	220.8
george l myers elementary school ✓	51911	U	517	111	21.47%	50%	258.5
south haven elementary school ✓	51968	U	459	135	29.41%	50%	229.5
valparaiso high school ✓	51962	U	2168	182	8.39%	40%	867.2
benjamin franklin middle school ✓	51964	U	719	76	10.57%	40%	287.6
thomas jefferson middle school ✓	51947	U	720	94	13.06%	40%	288
thomas jefferson elementary school ✓	51946	U	253	59	23.32%	50%	126.5
central elementary school ✓	51951	U	205	87	42.44%	60%	123
flint lake elementary school ✓	51944	U	556	127	22.84%	50%	278
<b>Amended 4-7-00</b>			<b>24393</b>				<b>10439.3</b>



Entity Number <u>151654</u>	Applicant's Form Identifier <u>2000-112-471-6</u>
Contact Person <u>Bob Carnal</u>	Phone Number <u>317-972-8832</u>

## Block 4: Discount Calculation Worksheet A for Individual Schools/School Districts

**Worksheet #A-14**

Page 6

of 6

**Instructions:** Individual Schools/School Districts use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

**10a Check only one:**

- ☐ Applying **ONLY** for an individual school, or **ONLY** site-specific services: Complete columns 1-7 only for each school. Add and number pages as needed. Then use each school's Entity Number and its discount from Column 7 to complete Block 5 site-specific service to that school.
- ☒ Applying for discounts on services shared by **ALL** schools in the district (with or without site-specific services as well): Complete all columns 1-8 for all schools in the district. Then use the Weighted Average Discount in 10c (below) to complete Block 5 for shared services.
- ☐ Applying for discounts on different shared services shared by different groups of schools (with or without site-specific services as well): Please complete one worksheet, columns 1-8 PLUS 10c, for EACH different group of schools sharing a service. Designate this worksheet A-1, A-2, A-3, etc.

**10b List entities and calculate discount(s).**

1	2	3	4	5	6	7	8
Name of School	Entity Number	Urban or Rural U or R	Total # of Students	# of Students Eligible for NSLP	% Students Eligible for NSLP (Col. 5 ÷ Col. 4)	Discount % from Discount Matrix	Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)
Porter County Education Interlocal	1303332	U	24393				10439.3
cooks corner elementary school ✓	51943	U	283	11	3.89%	40%	113.2
hayes-leonard elementary school ✓	51965	U	271	13	4.80%	40%	108.4
memorial elementary school ✓	51963	U	303	34	11.22%	40%	121.2
northview elementary school ✓	51945	U	316	39	12.34%	40%	126.4
parkview elementary school ✓	51954	U	263	53	20.15%	50%	131.5
Amended 4-7-00			25829				11040
							→ 43%

# Block 5: Discount Funding Request(s)

Block 5, page 14 of 19

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.  
 Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly.

RN # (to be assigned by administrator)

<b>11 Category of Service</b> (only ONE category should be checked) <input type="radio"/> Telecommunications Service <input checked="" type="radio"/> Internet Access <input type="radio"/> Internal Connections	<b>15 Contract Number</b> (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in instructions) <span style="float: right;"><b>01-99</b></span> <b>16 Billing Account Number</b> (e.g., billed telephone number) <span style="float: right;"><b>1A1SB</b></span>
<b>12 Form 470 Application Number</b> (15 digits) <b>363240000174049</b>	<b>17 Allowable Contract Date</b> (mm/dd/yyyy, based on Form 470 filing) <span style="float: right;"><b>3/2/99</b></span>
<b>13 SPIN - Service Provider Identification Number</b> (9 digits) <b>143016461</b>	<b>18 Contract Award Date</b> (mm/dd/yyyy) <span style="float: right;"><b>04/18/99</b></span> <b>19 Service Start Date</b> (mm/dd/yyyy) <span style="float: right;"><b>07/01/00</b></span>
<b>14 Service Provider Name</b> <b>AT&amp;T</b>	<b>20 Contract Expiration Date</b> (mm/dd/yyyy) <span style="float: right;"><b>04/18/04</b></span>

<b>21 Description of This Service:</b>	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # <b>2000-112-471-6</b>
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<b>22 Entity/Entities Receiving This Service:</b>	a. If the service is site-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service : _____ b. If the service is shared by all entities on a Block 4 worksheet, list the worksheet number (e.g., A-1): <b>A-14</b>
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Recurring Charges					One-Time Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (D x C)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (J x I)
\$1,375.00	\$0.00	\$1,375.00	12	\$16,500.00	\$2,300.00	\$0.00	\$2,300.00	\$18,800.00	43%	\$8,084.00